Setting Our Intentions: An Invitation to the Practice of Gratitude...
Caring for the Caregiver- Addressing Burnout & Compassion Fatigue in the Clinical Care Team

what fills your heart?

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Caring for the Caregiver-
Addressing Burnout and Compassion Fatigue in the Clinical Care Team

Objectives

• Define the concepts of professional burnout and compassion fatigue in those who care for the seriously ill.

• Describe the signs and symptoms of burnout and compassion fatigue.

• Explore strategies to nurture resilience and compassion satisfaction in the clinical care team
“The expectation that we can be immersed in suffering and loss daily and not be touched by it is as unrealistic as expecting to be able to walk through water without getting wet.”

~ Rachel Remen, MD
Dr. Anthony Back (ResilientClinician.org) describes professional burnout as a clinical syndrome of mental distress that ends in feeling used up, withdrawn, & the sense that your work no longer has meaning. It is characterized by:

- Emotional exhaustion
- Depersonalization (Cynicism)
- Low self-efficacy

Consequences of burnout:
- Suboptimal clinical decision-making
- Lower clinician empathy
- Decreased patient satisfaction
- Loss of workforce
Compassion Fatigue
“a broken, heavy heart”

- Term began to appear in the literature in the 1990’s.
- Profound emotional and physical erosion that takes place when helpers are unable to refuel and regenerate.
- Emotional “cost of caring” for others in emotional pain that has led helping professionals to abandon their work with traumatized persons. Compassion fatigue is also known as secondary or vicarious traumatization. Compassion fatigue may lead to burnout.
- Professional compassion fatigue is a result of repeated exposure to the suffering and trauma of others, whereas burnout tends to be related to the work environment itself.
Committed & stressed
(from Dr. Back’s presentation at CAPC 2015)

• 2014 survey AAHPM members
• 65% female
• 67% in palliative care <10 years
• 62% met criteria for burnout
• 49% expected to leave their job in next 10 years

- J ClinOncol2014
Measures That May Help Prevent Compassion Fatigue and Burnout and Nurture Resilience

• **Self Care** - exercise, nutrition, sleep, work-life balance... what fills you back up?
• Family, friends, colleagues
• Mindfulness, meditation
• Reflective writing/journaling
• Spiritual practice
• Making a difference
• **WORKPLACE RELATED:**
  • Supportive work community, mentors
  • Sustainable workload
  • Promotion of feelings of choice and control
  • Appropriate recognition and reward
  • Promotion of fairness and justice in the workplace
  • Training in communication skills
  • Continuing educational activities
  • Mindfulness-based stress reduction for team
  • Meaning-centered intervention for team

Assess your personal compassion fatigue and burnout scores at www.proqol.org
Mindfulness Moment

Mind Full, or Mindful?
Mindfulness

Attention to and awareness of what is occurring in the present moment in:

with a stance of open, non-judgmental curiosity
Self-Compassion

- Recognize
- Allow
- Investigate
- Nourish
“When you’re feeling overworked, stop and smell the roses that we installed as an app on your BlackBerry.”
Resources

Web sites we like:

- ResilientClinician.org
- GreaterGoodScience.org
- Compassion Fatigue.ca
- AGiftFromWithin.org
- HealthJourneys.com
- Self-Compassion.org
- BioethicsInstitute.org
- Upaya.org
“We live on the edge with our patients & families. We walk the tightrope of survival, tasting death, vulnerability and intimacy, victory and joy, brokenness and repair. We have shared people’s lives abundantly enough to write volumes, yet sometimes, we forget how extraordinary our work is.”

Brown-Saltzman
There's a thread you follow. It goes among things that change. But it doesn't change. People wonder about what you are pursuing. You have to explain about the thread. But it is hard for others to see. While you hold it you can't get lost. Tragedies happen; people get hurt or die; and you suffer and get old. Nothing you do can stop time's unfolding. You don't ever let go of the thread.
May your heart remain kind, your spirit fierce, and your soul brave.
References...

1. Historical Review in Understanding Burnout, Professional Compassion Fatigue, and Secondary Traumatic Stress Disorder From a Hospice and Palliative Nursing Perspective Christina S. Melvin, MS, PHCNS, BC, CHPN

2. “Why Are We Doing This?”: Clinician Helplessness in the Face of Suffering Anthony L. Back, MD,1 Cynda H. Rushton, PhD,2 Alfred W. Kaszniak, PhD,3 and Joan S. Halifax, PhD4

3. Self-care of Physicians Caring for Patients at the End of Life “Being Connected . . A Key to My Survival” Michael K. Kearney, MD, Radhule B. Weininger, MD, PhD, Mary L. S. Vachon, RN, PhD, Richard L. Harrison, PhD, Balfour M. Mount, MD